140% 128 1261

FEC FORM 3X

Use

Only

FE6AN026

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED

2014 JUL 25 AM 11: 42

FF. Mothed Lus County TER

Rev. 12/2004

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If to over the lines		LŽFĚ4M5	-
AMERICAN, L	GAGUS DF	CHARITE	75 LIG 101	RIGIAINI IZI A	T1101NS
ADDRESS (number and street)	7 400066	2,8,5,7,00,			
Check if different than previously reported. (ACC)					
	GRICUARIO	PARK	[N.Y 14,1	271-
2. FEC IDENTIFICATION N	IUMBER ▼	CITY	s	TATE A	ZIP CODE A
C 0 0 5 4 3 4	<u>54</u>]	B. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	F
July 15	(C) 12-Day	Primary	(12P)	General (12G)	Runoff (12R)
Quarterly Report October 15	Report for th	e: Conventi	on (12C)	Special (12S)	
Quarterly Report January 31 Year-End Report		ection on			in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	ion (d) 30-Day POST-Electic	15-27			Special (30S)
Termination Repo	ļ	lection on		· · · · · · · · · · · · · · · · · · ·	in the State of
5. Covering Period 61 2014 through 63 2014					
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasurer DAUID WIEVSK)					
Signature of Treasurer Date Date Date Date					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.					
Office				FEC	C FORM 3X